



## Eating Disorders Among Girls and Women in Canada Report: Where are we now?

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**In November 2014, the Standing Committee on the Status of Women published a report entitled *Eating Disorders Among Girls and Women in Canada*.**

The 75-page report (available [here](#)) contained 25 recommendations for the Government of Canada related to better addressing the needs of those affected by eating disorders, as well as their families, and of those at risk of being affected in the future. The report is an important step forward in shining a light on eating disorders, and in the words of Dr. Blake Woodside, Medical Director of the Program for Eating Disorders at Toronto General Hospital, as quoted on page 5 of the report, “it offers hope to both those who suffer and their families, hope that change can occur”. One year later, how far have we come and how much of that hopefulness remains?

### HOW THE REPORT CAME TO BE

The eating disorder report was initiated when Terence Young, a Member of Parliament on the Standing Committee on the Status of Women, made a motion for the committee to conduct a study on eating disorders, which was unanimously accepted. Terence has a personal connection to the cause, as he lost his daughter Vanessa, who had an eating disorder. Vanessa died at age 15 after being prescribed a medication contraindicated for individuals with eating disorders (Young, 2009).

As a result of Young’s motion, the Standing Committee on the Status of Women undertook the eating disorder study. Given that the majority of those affected by eating disorders are girls and women, it may seem appropriate that this particular committee conducted the study. However, it is worth noting that the Liberal Party’s response

to the report recognized that “an increasing number of boys and men also experience these conditions” and that it felt eating disorders should have been studied at the Standing Committee on Health (p. 71). Furthermore, neither the report itself nor the Liberal response mentioned trans/gender queer populations specifically, which is important to consider given that recent research has shown elevated rates of eating disorders among these communities (Diemer et al., 2015).

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### THE REPORT’S RECOMMENDATIONS

The report’s 25 recommendations were meant to provide direction to the Government of Canada in addressing the issue of eating disorders. Although there is not space here to go into detail on all 25 recommendations, they can be viewed on pages 53 to 57 of the report. Themes among the recommendations consisted of prevention, raising awareness, education, data collection, research, and treatment. Interestingly, given that the report was created by the Standing Committee on the Status of Women, no recommendations make any reference to gender or target factors that may specifically put girls and women at higher risk of eating disorders.

## AN OVERVIEW OF THE RECOMMENDATIONS

The numbers in parentheses correspond to the numbers by which individual recommendations are identified in the report.

**Prevention:** Related to prevention, recommendations included researching the impact of media messaging (1), promoting media literacy (2), providing more sensitive nutrition education (4), and developing a multifaceted health and wellbeing campaign to foster a positive sense of self in youth (5).

**Raising Awareness:** Related to raising awareness, the report advocated for an online public resource to raise awareness about the prevalence of eating disorders, as well as to collect and provide statistics and best practices (6), and for involving those living with eating disorders, their families, and stakeholders in discussions about mental health (7).

**Education:** Related to education, the report called for ensuring that the curricula for health care professionals includes sufficient materials on eating disorders (8), and addressing the lack of understanding and stigmatization of eating disorders in the medical community, as well as broader Canadian society (11 and 12).

**Research:** Related to research, recommendations included establishing a centre of excellence or national research chair in eating disorders, and increasing funding for research in eating disorders (14).

**Data Collection:** Related to data collection, the report recommended that all jurisdictions send eating disorder data involving visits to hospital emergency departments to the Canadian Institute for Health Information (15), and that data from primary care and community-based clinics also be sent (16).

**Treatment:** Almost half of the report's recommendations related to treatment, such as ensuring access (17), with access to in-patient care as needed on a timely basis or out-of-province care, including care in the United States (18), reducing wait times (19), developing consistent standards for clinical care (21), offering integrated treatment through community programs (22), providing treatment by multi-disciplinary medical teams with experience and expertise on treating eating disorders (23), improving research on treating eating disorders, such

as deep brain stimulation and trans-cranial magnetic stimulation (24), and ensuring that all patients receive an adequate length of care (25).

## A NATIONAL EATING DISORDERS STRATEGY

One of the key requests of witnesses that testified as part of the study was for the development of a national eating disorders strategy in Canada. These witnesses consisted of both experts in the field, as well as individuals and family members with lived experience. Their hope was that such a strategy could include all levels of education, practice and research, and provide support to all provinces and territories (p. 23). However, as noted in the Liberal Party's response, there is no recommendation for a national strategy in the report.

While Canada does not yet have an eating disorder-specific strategy, the Mental Health Commission of Canada (MHCC) did release an overall mental health strategy, *Changing Directions, Changing Lives: The Mental Health Strategy for Canada* in 2012 (available [here](#)). The Mental Health Commission of Canada's Youth Council also produced a youth-friendly, more accessible version of the strategy in May 2015 (available [here](#)). *The Mental Health Strategy for Canada* identifies six strategic directions, and many of the recommendations made in the eating disorder report fit into these broader strategic directions, such as focusing on mental health promotion, as well as access to services, treatments, and supports. If the MHCC's broader mental health strategy were implemented, then it seems to follow that many of the eating disorder report's recommendations would also come to fruition. In their response to the eating disorder report, the New Democrats urged the government to "take immediate action to implement the Mental Health Commission of Canada's 2012 Mental Health Strategy" (p. 68).

The *Mental Health Strategy for Canada* is intended to be inclusive of the full continuum of mental health challenges and illnesses, rather than disorder-specific. A conversation with the MHCC revealed that while they agree that disorder-specific strategies could be useful, they also acknowledge that these require extensive amounts of investment, and that there is theoretically and politically more work to do before an eating disorder strategy can be developed. In the interim, they suggest that there is much that can be done, such as raising awareness, convening with stakeholders, and ensuring that the voices of those with lived experience

and their families are included in discussions. In the short-term, they say that these steps might actually produce more change than a strategy would on the ground.

The MHCC stated that they have met several times with members of the National Initiative for Eating Disorders (NIED), an Ontario-based advocacy group, and that they are making efforts to connect NIED with national groups concerned with mental health, such as the Canadian Alliance on Mental Illness and Mental Health, the Canadian Mental Health Association and the Provincial Territorial Advisory Group on Mental Health, which is comprised of leaders in mental health across Canada. These steps will ensure that NIED is well placed to continue to advocate for meaningful change.

## NEW PUBLIC HEALTH AGENCY OF CANADA RESOURCE ON EATING DISORDERS

The Standing Committee on the Status of Women's report brought eating disorders to the attention of the Public Health Agency of Canada, which has recently added a section to its online Canadian Best Practices Portal that provides information and resources specific to eating disorders. The website section (available [here](#)) is intended to reach public health professionals and to assist them in planning and developing programs for promoting positive body image and preventing eating disorders.

## OVERALL IMPRESSIONS OF THE REPORT AND FINAL THOUGHTS

Anyone affected by eating disorders likely knows that change is needed – change on many levels, including education, practice and research. For those affected, there is a lot at stake, and the need for change is felt with urgency. The fact that the Government of Canada was taking on this issue

through the Standing Committee on the Status of Women provided for many a sense of hope that positive change would follow. However, for some that hope was fleeting, as the report was criticized for not going far enough – for protecting the status quo and failing to take up the recommendations made by witnesses (p. 73). The government response to the report (available [here](#)) was also criticized for its lack of commitment to action.

Although the report was received by some as disappointing or frustrating, and the recommendations not strong enough, it has been a successful tool in helping to get eating disorders on the public and political agenda. The report was disseminated to all Members of Parliament and also garnered media coverage. It has sparked conversations between stakeholders such as the MHCC and NIED, and will likely be helpful in continuing to advance action around the cause. The report presents the facts around eating disorders, and although perhaps the faces and stories behind those facts are what really matters and what will ultimately move people to action, the facts set the stage for those faces to be seen more clearly and those stories to be heard more loudly. Let's hope that the report is the start of a larger conversation and increased commitment to action to create a Canada where such a report is no longer needed.

### A note from NEDIC

Readers, what you think about the report and the state of eating disorders in Canada? Share your thoughts through social media – visit our [Facebook page](#) or tweet us [@theNEDIC!](#)



**NEDIC Helpline (416) 340-4156 or Toll-Free 1-866-NEDIC-20**  
**Monday to Friday 9am–9pm EST**

Through our programming, campaigns, and national toll-free helpline, NEDIC is committed to prevention, building awareness and ensuring that people no longer suffer in silence.

## REFERENCES

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## EATING DISORDER AWARENESS WEEK (EDAW) IS FAST APPROACHING!

EDAW 2016 will take place February 1<sup>st</sup>–7<sup>th</sup>. This year we want to promote the message that eating disorders *can* and *do* affect anyone and to remind Canadians that talking has the potential to save lives. We hope to address the diversity and encourage all affected by eating disorders to reach out for help with our new EDAW Poster.

Visit our [online store](#) to order this poster, as well as other EDAW materials.

NEDIC is excited to be hosting a variety of awareness activities during EDAW including:

- 3<sup>rd</sup> annual Spoken Word event at the Round (Toronto)
- 2<sup>nd</sup> annual Twitter chat
- Community Panel (Toronto – co-hosted with Sheena's Place and National Initiative for Eating Disorders)

We ask you to join in the conversation: Help us to raise awareness and understanding of eating disorders in your community. If you plan to host an event, [let us know](#) and we can post the details on our website. Display a poster, share and encourage discussion in your community, or reach out to local media.

Every effort, however small, makes a difference. If you can't commit to anything else this year, please consider making a [donation](#) to NEDIC. Your donation will support NEDIC's National Toll-Free Helpline, and our Outreach & Education programming in the community. *All gifts of \$20+ will receive a tax receipt.*

**Talking saves lives... so please help keep the conversation going.**

